

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/ 594224

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
6		4				
7		4				
8		4				
9		4				
10		4				
11		4				
12		4				
13		4				
14		4				
15		4				
16		4				
17		4				
18		4				
19		4				
20		4				
21		4				
22		4				
23		4				
24		4				
25		4				
26		4				
27		4				
28		4				
29		4				
30		4				
31		4				
32		4				
33		4				
34		4				
35		4				
36		4				
37		4				
38		4				
39		4				
40		4				
41		4				
42		4				
43		4				
44		4				
45		4				
46		4				
47		4				
48		4				
49		4				
50		4				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		5				
52		5				
53		5				
54		5				
55		5				
56		5				
57		5				
58		5				
59		5				
60		5				
61		5				
62		5				
63		5				
64		5				
65		5				
66		5				
67		5				
68		5				
69		5				
70		5				
71		5				
72		5				
73		5				
74		5				
75		5				
76		5				
77		5				
78		5				
79		5				
80		5				
81		5				
82		5				
83		5				
84		5				
85		5				
86		5				
87		5				
88		5				
89		5				
90		5				
91		5				
92		5				
93		5				
94		5				
95		5				
96		5				
97		5				
98		5				
99		5				
100		5				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

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**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		5				
102		5				
103		5				
104		5				
105		5				
106		5				
107		5				
108		5				
109		5				
110		5				
111		5				
112		5				
113		5				
114		5				
115		5				
116		5				
117		5				
118		5				
119		5				
120		5				
121		5				
122		5				
123		5				
124		5				
125		5				
126		5				
127		⑩				
128		5				
129		5				
130		5				
131		5				
132		⑩				
133		⑩				
134		5				
135		5				
136		5				
137		5				
138		5				
139		5				
140		5				
141		5				
142		5				
143		5				
144		5				
145		5				
146		5				
147		5				
148		5				
149		5				
150		5				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151		5				
152		5				
153		5				
154		5				
155		5				
156		5				
157		5				
158		5				
159		5				
160		5				
161		5				
162		5				
163		5				
164		5				
165		5				
166		⑩				
167		5				
168		5				
169		⑩				
170		⑩				
171		⑩				
172			1			
173						
174						
175						
176						
177						
178						
179						
180						
181						
182						
183						
184						
185						
186						
187						
188						
189						
190						
191						
192						
193						
194						
195						
196						
197						
198						
199						
200						
TOTAL IND.	5	↓	1	↓		↓
TOTAL DEP.	730	←	14	←		←
TOTAL CLAIMS	735		15			